

# The Independent Inquiry into a Professional Body for Pharmacy



Nigel Clarke  
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# TIMETABLE 2007

- 1 Nov Consultation Paper issued
- 22/23 Nov Public Meeting & Evidence Session, Cardiff
- 28/30 Nov Public Meeting & Evidence Session, London
- 5 Dec Evidence Session, London
- 12 Dec Evidence Session, Bristol
- 19 Dec Evidence Session, London

# TIMETABLE 2008

- 9/10 Jan Public Meeting & Evidence Session, Edinburgh
- 14 Jan Public Meeting, Leeds
- 17 Jan Evidence Session, London
- 21 Jan Public Meeting, Manchester
- 24 Jan Public Meeting, Birmingham
- 28 Jan Public Meeting, Newcastle
- February : a sequence of meetings to confirm detail and explore points further

# THE TEAM



- Nigel Clarke, Chairman
- Expert Advisory Panel:
  - Professor dame Jill Macleod Clark, University of Southampton
  - Professor Robert Dingwall, University of Nottingham
  - Peter Owen, CB, senior civil servant and ex Secretary General, ICAEW
- John Thompson, Clerk to the Inquiry
- Grace Smallwood, Project Manager

# THE RESPONDENTS

- 32 organisations gave evidence at formal sessions
- Written submissions were received from:
  - 44 professional bodies
  - 18 educational bodies
  - 3 trade bodies
  - 170 individuals

# GENERAL FINDINGS

- Significant unanimity within pharmacy on many issues
- Attitudes towards RPSGB strongly influenced by regulator role
- Demands of regulatory role have conflicted with professional body development
  - particularly in terms of member services

# THE NEW PROFESSIONAL BODY

- © Must be perceived as 'new', and not as a membership club
- © Mass membership, but leading edge too
- © Member facing

# THE NEW PROFESSIONAL BODY

- © Must generate income from core activity
  - ★ Meet members' needs and their professional challenges
  - ★ Other income streams follow from this
- © Must earn respect of Governments, Regulator and the public
- © The transition phase will be crucial

# PURPOSE AND FOCUS

## © Leadership

- ★ to the public, as voice and advocate

- ★ to the profession

- for practice

- for science

## © Membership support services

# MEMBERSHIP

REGISTERED PHARMACISTS ARE THE CORE OF  
THE PROFESSIONAL BODY

# MEMBERSHIP CATEGORIES

- ⊙ GPhC Registered Pharmacists
- ⊙ Non-practising and retired pharmacists
- ⊙ Students undertaking pharmacy degrees
- ⊙ Pre-registration trainees
- ⊙ Pharmaceutical scientists
- ⊙ Academics in related fields
- ⊙ International
- ⊙ GPhC Registered Technicians

# THE PROFESSIONAL BODY AND PATIENT SAFETY

- © Safe use of medicines a vital issue for the public
  - ★ health, social and financial costs
- © Already a priority for the Society
- © Patient safety must lie at the heart of the work of the new Professional Body

# FUNCTIONS I

- ⊙ Provide single voice and vision for pharmacy
  - ★ effective internal and external communicator
  - ★ international role
- ⊙ Develop members' leadership skills
- ⊙ Strengthen relationships with other health professions
  - ★ a 'Forum for Prescribers'?

# FUNCTIONS II

## © POLICY DEVELOPMENT

### ★ NATIONAL DECISIONS

- DEPARTMENTS OF HEALTH
- GPhC

### ★ SUPPORT FOR LOCAL SERVICE PROVISION

# CREDIBILITY

- © Demonstrably good corporate governance
- © Authority in statements
  - ★ sound evidence base
  - ★ united membership support for position

# FUNCTIONS III

- © Developing evidence to underpin its work
  - ★ commission research and lobby others to undertake specific research
  - ★ assist, inform research communities
- © Provide bridge between members to ensure daily practice and advice to patients is informed by up to date scientific opinion

# FUNCTIONS IV

- © Setting of professional and ethical standards
  - ★ vital to work with GPhC from start
- © Working closely with higher education sector on undergraduate curriculum
- © Support for pre-registration trainees and their tutors

# EDUCATION

- © Central role in education generally
- © Essential to support members on CPD
  - ★ simple systems to record
  - ★ remedial support
  - ★ accreditation
  - ★ arrangements for filling gaps in provision

# REVALIDATION

- © Play a role in developing standards for revalidation
- © No role in policing
- © Services should include systems to allow members to assess competence and the provision of remedial support

# OTHER SERVICES

- © High quality pharmacy management advice
- © Provision of information services
  - ★ library and e-services
- © The Benevolent Fund
  - ★ highly regarded and valued

# PUBLISHING

- © Much valued by the profession, especially for its reference texts
- © The PJ is an integral forum for pharmacists, whether in UK or elsewhere
- © Further scope for developing, eg e-publishing

# BOUNDARIES :

SERVICES THE PROFESSIONAL BODY SHOULD NOT  
OFFER

© Trade union functions

★ representation of individual members in  
proceedings against them

© Financial services where inappropriate

# STRUCTURE

## KEY FOUNDATION ELEMENTS

- ⊙ Member facing, able to deliver services at appropriate level
- ⊙ Responsive to all stakeholders
- ⊙ Respecting the fact of devolution
- ⊙ Guiding principle is 'smart subsidiarity'

# STRUCTURE

- © GB Council
  - ★ setting policy, strategy
  - ★ overall voice of the profession
- © National Boards with enhanced autonomy
  - ★ liaising with Governments/NHS
  - ★ providing branch support
    - in conjunction with HEIs?

# THE COUNCIL

- ⊙ Specific representation from National Boards
- ⊙ Sectoral representation
  - ★ community
  - ★ hospital/pct/health board
  - ★ science & academia
- ⊙ Representatives from 'Committee of Special Interest Groups'
- ⊙ Technician representative, pre-registration and student observers
- ⊙ Elects President, President elect and Treasurer from its members
- ⊙ May have some lay involvement

QuickTime™ and a  
decompressor  
are needed to see this picture.

# NATIONAL BOARDS

- ⊙ Need to be consistent in structure
- ⊙ Representation by election from community, hospital/pct/health board, science & academia, technicians
- ⊙ Co-opted members possible (lay?)
- ⊙ Chair and Vice-chair elected from amongst members

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# THE COMMITTEE OF SPECIAL INTEREST GROUPS

- © Guardian of specialist and advanced practice, gb wide
- © Leads on encouraging and commissioning research
- © Links to HEIs
- © Provides structure to allow demonstration of competence for advanced, consultant and fellowship status
- © The Academy of Pharmaceutical Sciences should be invited to become a Special Interest Group

# The Executive Board

- © Essential to separate governance and executive functions
- © Charged with:
  - ★ Developing strategic policy proposals for council
  - ★ Implementation of agreed strategy
  - ★ Day-to-day management of the organisation

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# PRACTICAL ISSUES

© Financial viability : essential factors

- ★ Provide services of value to members
- ★ Transparency of how fees are spent
- ★ Ensure that fee levels take account of future regulatory fees, and total costs to pharmacists now

# PRACTICAL ISSUES

- © Locate separately from new Regulator as soon as is practicable
- © Accommodation strategy should follow from structure of the Professional Body
- © Members should be consulted on the options for the management of the archives and museum of the Society

# THE ROLE OF THE RPSGB

- © A sense of separation from aspects of the past is essential
- © To be successful, the new body must be perceived to be inclusive
- © The RPSGB is the only organisation around which the profession can coalesce and meet the timetable of change

# TITLE OF THE NEW BODY

- © To be determined by its members
- © Some key considerations from the consultation:
  - ★ The use of the word 'Royal' is important
  - ★ The profession does not favour the term 'Royal College'
  - ★ To meet the timetable, changes should involve minimal AMENDMENT to the charter

# THE TRANSITION PROCESS

- © The GPhC will be operational by January 2010. This should be the target date for the new professional body arrangements
- © RPSGB should convene a transitional committee to oversee the process of preparation
- © This committee should have representation from all major bodies who have expressed an interest in becoming part of the new Professional Body
- © It should also involve all stakeholders with an active interest in the future of the profession
- © It should produce a prospectus for new Professional Body

# TRANSITION II

- © Aim to set up shadow council six months before new Professional Body
- © Reflect structure of new body

# TAKING STOCK

- ⊙ Clear recognition that this is an opportunity for pharmacists
- ⊙ Enthusiasm to look forwards
- ⊙ Care needed to ensure distinctive leadership during the process of change